AGENDA ITEM 10

REPORT NO IJB 76/23



ANGUS HEALTH AND SOCIAL CARE

INTEGRATION JOINT BOARD – 25 OCTOBER 2023

WORKFORCE PLANNING PROGRESS UPDATE

REPORT BY GAIL SMITH, CHIEF OFFICER

ABSTRACT

Scottish Government requires the Angus Health and Social Care Partnership (AHSCP) to have a three year workforce plan commencing July 2022. The three year plan and accompanying action plan was approved at IJB in June 2023 (report IJB 36/22).

An annual update of the workforce plan is required to evaluate progress and establish if workforce priorities and challenges remain the same as the previous year or if these have changed. If these have changed and new priorities have emerged, the annual update of the workforce plan should illustrate mitigations to address these.

This report provides the Integration Joint Board with the first annual update of the workforce plan (**Appendix 1**), highlights the progress that has been made in the first year of the workforce plan implementation and highlights the main workforce issues.

1. **RECOMMENDATIONS**

It is recommended that the Integration Joint Board:-

- (i) Agrees the content of this report;
- (ii) Acknowledges the progress that has been made in the first year of the workforce plan; and
- (iii) Approves the annual update of the workforce plan.

2. BACKGROUND

In 2019 the Scottish Government's Integrated Workforce Plan for Health and Social Care confirmed that Workforce Planning for NHS Boards and Health and Social Care Partnerships should be undertaken on a three-year cycle to align with Financial and Operational Planning cycles.

Following submission to Scottish Government of the Angus IJB Workforce Plan, Angus IJB received feedback from the Scottish Government Workforce Planning Data, Analytics and Insight Unit, based on the checklist in Appendix 1 of the DL. This feedback was very positive and concluded that 'the quality of the content in the partnership's draft plan is very good overall and effectively covers the areas set out in the guidance.'

Scottish Government guidance DL (2022) 09 on workforce planning included a requirement to undertake an annual update of the workforce plan for all Health and Social Care Partnerships and all NHS Boards.

In May 2023 Scottish Government issued a new directive 'Three Year Workforce Plans: Developing an Integrated Process'. In this directive NHS Boards and Health and Social Care Partnerships are asked to streamline reporting, and rather than separately submitting annual workforce plan revisions to the Scottish Government. NHS Boards are asked to use the Annual Delivery Plan process to update the Scottish Government on their workforce plans and to work with Health and Social Care Partnerships to provide comprehensive updates on workforce planning. NHS Tayside submitted their Annual Delivery Plan to Scottish Government in June 2023 following collaboration with the AHSCP. We continue to work closely with NHS Tayside and other colleagues to address regional workforce planning issues.

The AHSCP have taken the decision to continue to update the AHSCP three year Workforce Plan on an annual basis to ensure progress is being measured against local actions and workforce priorities and identification and mitigation against new emerging priorities and risks continues in response to local workforce priorities and the needs of the local workforce.

3. CURRENT POSITION

In September 2022 the Workforce Steering group established 5 workforce sub groups to drive forward work in relation to workforce challenges. The workforce sub groups focus on:

- Recruitment and Retention
- Workforce Data
- Staff Health and Wellbeing
- Learning and Development
- Safer Staffing Implementation Group

In August 2023 the results of an internal audit on the workforce were published. (Report No AN04/23). The report concluded positively on the link between the Workforce plan and managing the risk of having the right staff with the right skills in the right place to achieve objectives. It recognised that the setting of priority actions for the Workforce Action plan was also based on a review of the strategic risk at that time and that additional future mitigating actions to achieve the target risk score of 16 are clearly linked to the implementation of the Workforce plan and the monitoring arrangements for the Workforce Action plan.

The audit opinion of the level of assurance is reasonable assurance. There were two recommendations arising from the audit report. The first recommendation relates to the annual workforce plan update providing assurance of the totality of work being undertaken. The AHSCP Workforce Plan Annual Update 2023 addresses this recommendation by including system wide assurance of the totality of the work being undertaken.

The second recommendation relates to the development of workforce data and accompanying Key Performance Indicators (KPI's). A core dataset for wider workforce planning purposes is now in place and has been used to inform the AHSCP Workforce Plan Annual Update 2023. This will be further developed to include KPIs and further qualitative as well as quantitative data. Work is progressing to develop a Tayside wide minimum dataset for workforce planning and this will enhance our local dataset. Care Home/ Care at Home viability dashboards are complete and have gone live. The dashboards contain information in relation to care homes and care at home which includes a RAG status based on staffing levels, care inspectorate grades, details of any investigations or complaints, number of hours being delivered and vacancies. The information is starting to be populated and will further enhance the core dataset and development of associated KPI's.

3.1 CONSULTATION

In May 2023 an online MS Forms Survey was sent to staff in all services across AHSCP to ask for information in relation to informing the first annual update of the Workforce Plan and action plan. In August 2023 an online MS Forms Survey was sent across AHSCP to ask for feedback on the first draft of the workforce plan annual update and updated action plan 2023. Feedback was specifically requested in relation to accuracy and currency of information and respondents were invited to submit any additional content they felt was important. This survey was distributed across the statutory services, third and independent sectors. The feedback received from both surveys has informed the annual update of the workforce plan and action plan update.

3.2 PROGRESS

The AHSCP Workforce Plan, Action Plan and Annual Update ensures a focused approach to improvement on workforce risks. The establishment of the five work streams is working effectively. Each work stream has a focused action plan to drive forward work in relation to our workforce challenges. A fifth workstream has been established for the Health and Care

(Staffing) (Sc) Act 2019 and a Tayside Workforce Group in place to address regional workforce issues collaboratively across the region. Workforce Service Risks have been developed.

A detailed list of the progress made to date can be viewed in section 2 of the Workforce Plan Annual Update (**Appendix 1**).

3.3 SUCCESSES

There is evidence that our current controls are beginning to have effect in some areas of the workforce and it is important to highlight this. For example:

- Staff Vacancies: the percentage of Council staff working within the AHSCP on permanent contracts has risen from 73% to 89% with the percentage of supply staff decreasing from 19% to 8%. This is a reassuring development in relation to the stability of the current workforce. In NHS Tayside, the high rate of staff on permanent contracts has remained static at 96%.
- Sickness Absence: NHST staff absence rates beginning to decrease. AC staff absence rates have seen a significant decrease of almost 50% since 2021.
- An increase in 54 people contacting the AHSCP about a job in care following our recruitment campaign.
- Foundation Apprentice Placements for young people have doubled since last year.
- Trainee District Nurse posts have been established due to a lack of applicants for District Nurse post vacancies. The initial review of this has been positive with 5 trainee District Nurses appointed.
- Care at home providers have noted a significant increase in suitable candidates. Some care at home providers have reported a more positive response to recent recruitment for Social Care Officers with significantly reduced vacancy numbers.
- Some care providers have reported that staff retention has improved, and vacancies have remained low.
- Before October 2022, our average delayed discharge rates were 22 beds per week. Since October, the average delayed discharge rates have reduced to 14 beds per week. This illustrates a direct positive impact of the implementation of the Angus Discharge Team. We continue to have one of the lowest delay rates nationally.
- In excess of 50 new posts have been established between July 2022 and July 2023 to support the workforce.

3.4 WORKFORCE CHALLENGES

We continue to experience a range of workforce challenges driven by:

- Demographic changes including an ageing population and increase in complexity of need.
- Increase in end of life care.
- Increase in quantity of care and support required by individuals.
- Increase in Adult Support and Protection referrals.
- Increase in Adults with Incapacity Act work and the number of Guardianships.
- Difficulties recruiting staff in general and difficulties recruiting to specific posts.
- Increase in demand for care at home provision.
- · Difficulties with staff retention.
- · Increased improvement activity impacting on workforce capacity.
- The cost of living crisis.

There is an imbalance between demand and our supply of staff, partly due to the age profile of our workforce and shortages of key professionals. Challenges remain in relation to difficulties recruiting to specific posts, the significant growth in care at home demand, vacancies in care homes, timescales for recruitment processes, staff retention in specific areas such as care at home, shortages of GP's and pharmacists and increasing demand and complexity of need.

The three year workforce plan reflects a shift in the traditional delivery of services towards new, innovative ways of working. This is critical in addressing the reducing workforce, significantly increased policy and legislative requirements, and an increasing demand and changing demographic within the population. Many of these improvement programmes have now been completed and implemented. Those still to be completed demonstrate good progress.

4. PROPOSALS

It is proposed that the Integration Joint Board agrees the annual update of the workforce plan and the progress that has been made over the past year to mitigate against the workforce challenges and risks.

5. FINANCIAL IMPLICATIONS

The Angus IJB published its updated Strategic Financial Plan for the period 2023/24 to 2025/26 in April 2023. The plan has been developed in an uncertain and challenging environment and acknowledges that a number of financial risks remain.

It has remained a general assumption that most of the IJB's demographic pressure will be in services responding to increases in older age group populations and long term conditions (e.g., home care, care management, community nursing and prescribing) and that, for example, the inpatient and residential care home components of care within the Angus IJB will not be expected to see capacity growth, albeit may see changes in acuity.

The capacity of the IJB to continue to support further increases in demographic pressures is now extremely limited. On that basis, and for this iteration of the financial plan, it is now assumed that only a nominal allowance is made for further demographic pressures. This nominal allowance would have to cover any required increases in budgets across all services and in all settings (i.e., community services, residential services and hospital settings). This is a significant change to the IJB's overall planning and puts a much-increased focus on services either containing the impact of demographic and service pressures through local reprioritisation or mitigation of the pressures.

It should be noted that all services in the Partnership have benefitted from the 2021/22 to 2022/23 Scottish Government funding for Expanding Care at Home, Multi-Disciplinary Teams, Health and Social Care staffing and Chief Social Care Officer Funding. That investment totalled over £4.5m on a recurring basis.

The strategic financial plan notes the following risks in relation to workforce:

- Reviews of Safe Staffing issues re Health and Care (Staffing) (Scotland) Act and review of healthcare tasks in community setting.
- Community Nursing Job re-evaluations may require reworking of workforce models.
- Workforce and recruitment issues may have a knock on effect on IJB costs beyond service delivery issues.
- Demographic Pressures e.g., in Older People Services reflecting population changes.
- National Care Service there may be implications for funding arrangements or managing issues such as changed to "Charging arrangements."

There will be financial implications arising from many of the changes which are identified within this workforce plan, but these have to be informed by a realistic understanding of the available resource envelope, as described in the Strategic Financial Plan.

6. RISK

Risk Description	As a result of changing demographics, national workforce issues, new duties affecting our staff and people who use our services, including the consequences of the COVID-19 Pandemic there is a risk that Angus HSCP will be unable to develop and sustain its workforce to meet its legal obligations under the Public Bodies (Joint Working) (Scotland) Act 2014 and any other relevant legislation.
Risk Category Resource (Workforce)	
Inherent Risk Level	Likelihood 5 x Impact 5 = Risk Scoring 25
Mitigating	• All senior strategic, assurance and management groups are

Actions	 aware of, monitor and implement ways of mitigating the workforce risks. Angus HSCP Workforce Steering Group provides a dedicated forum where workforce issues can be addressed and improvement actions undertaken. Recruitment and Training of Advanced Practice. This recognises that a significant increase in resource for training, learning and support will be required to increase the number of advanced nurse practitioners and advanced practitioners in our HSCP services. Working with employing organisations to improve recruitment. Increased opportunities to promote career opportunities in Angus HSCP. Development of Recruitment and Retention Group. Succession Planning. 		
Residual Risk Level	Likelihood 4 x Impact 4 = Risk Scoring 16		
Planned Risk Level	Likelihood 4 x Impact 4 = Risk Scoring 16		
Approval recommendation	The current risk score has been reduced to 16, which is the planned risk score. The rationale for this includes strong oversight of the issues, regular meetings of the Workforce Steering Group, 5 active workforce sub groups that are focussed on mitigating risk and addressing workforce challenges, an increase in new posts across the AHSCP and reasonable assurance being received from our Internal Audit report. Some of the planned controls within the strategic risk have now been completed and further controls have been added. Close monitoring arrangements continue to inform the effectiveness or otherwise of these controls. The annual workforce plan update provides detailed evidence of the effectiveness of current controls and the introduction of additional controls to further mitigate workforce risk.		

7. OTHER IMPLICATIONS (IF APPLICABLE)

There are no other implications.

8. EQUALITY IMPACT ASSESSMENT

An Equalities Impact Assessment (EQIA) has been developed alongside this annual workforce plan update. The EQIA process commenced at the earliest stage of the plan development to ensure that equality implications were considered throughout the development of the plan. As part of the EQIA process, the impact of this plan will be monitored throughout its implementation to ensure that mitigating actions continue to be identified and appropriate action taken to minimise any negative impact this plan may have on people who have protected characteristics as specified in the Equality Act 2010 (discrimination against someone due to age, disability, gender reassignment, marriage and civil partnership, pregnancy and maternity, race, religion or belief, sex and sexual orientation). The EQIA can be viewed in **Appendix 2**.

9. DIRECTIONS

The Integration Joint Board requires a mechanism to action its strategic commissioning plans and this is provided for in Section 26 to 28 of the Public Bodies (Joint Working) (Scotland) Act 2014. This mechanism takes the form of binding directions from the Integration Joint Board to one or both of Angus Council and NHS Tayside.

Direction Required to Angus Council, NHS Tayside or Both	Direction to:	
	No Direction Required	Х
	Angus Council	
	NHS Tayside	
	Angus Council and NHS Tayside	

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List of Appendices:

Appendix 1Workforce Plan Annual Update 2023Appendix 2Equality Impact Assessment